The following guidelines should be used by all persons reviewing and approving e-QIP requests for TMA's e-QIP Program. TMA PSB Review Guidelines is NOT all-inclusive; items not covered in this document should be referred to the appropriate government TMA PSB personnel.

ITEM	REJECT	ACCEPT	CONSIDERATIONS
		Attach ATS	
1. FULL LEGAL NAME (Last, First, Middle)	Х		The name and spelling of the name must be consistent with the name in the FD258 and other forms submitted for the e-QIP request.
		X	Middle name must be spelled out, if initial only, subject must explain this in the additional comments.
2. DATE OF BIRTH (DOB)	Х		DOB must be consistent with the DOB in the FD258 and other forms submitted for the e-QIP request.
3. PLACE OF BIRTH (POB)	Х		POB must be consistent with the POB in the FD258 and other forms submitted for the e-QIP request.
4. SOCIAL SECURITY NUMBER (SSN)	Х		SSN must be consistent with the SSN in the FD258 and other forms submitted for the e-QIP request.
5. OTHER NAMES USED	X		If other names used, last, first, and middle name are required. Maiden name or full name at birth must be clearly stated, with month/year to month/year used.

	Х	If subject checked NO, but there is an indication in the SF86 that another name was used, reject to the subject.
6. MOTHER'S MAIDEN NAME	Х	Last, first, and middle name required. Subject must provide the information or explain why they cannot provide.
7. IDENTIFYING INFORMATION	Х	Subject must provide the information.
8. CONTACT INFORMATION	Х	Subject must provide the information. Current contact information must be provided; at least one phone number is required.
9. CITIZENSHIP	X	One of the blocks must be checked. -if US Citizen or national by birth, born outside the US is checked, subject needs to provide one of the following: US Passport, Documentation of US Citizenship Born Abroad, or Citizenship Certificate is required. -if US Citizen or national by birth, born outside the US is checked, and the subject does NOT have a US Passport, Documentation of US Citizenship Born Abroad must be attached. -if Naturalized US Citizen is checked, subject needs to provide: Alien Registration Number, Citizenship Certificate, or Naturalization Certificate. -Alien Registration Number or immigration status is required.

		Currently, PSB is not requesting investigations for non-US Citizens, if subject is a non-US Citizen, notify PSB Government staff.
-US Passport	Х	Complete information is required if applicable.
-Alien Registration Number	Х	Complete information is required if applicable.
-Documentation of US Citizens born abroad	Х	Complete information is required if applicable.
-Citizenship/Naturalization Cetificate	X	Complete information is required if applicable.
-Immigration Status	Х	Complete information is required if applicable.
10. CITIZEN INFORMATION	Х	Yes/No response is required.
11. RESIDENCE HISTORY	X	All residences within the last 10 years with no gap is required. A residence before the subject's 18th birthday is not required, unless it is to provide a minimum of 2 years residence history. Name, address, and phone number of a person who knew the subject at each address for the last 3 years are required. All contact information must include a physical address.

		PO Boxes are unacceptable.
		APO/FPO is allowed, however the physical address must be included.
12. EDUCATION HISTORY	X	All education within the last 10 years and most recent degree earned is required. If no degree or diploma received, subject must list the school attended. Name, address, and phone number of a person who knew the subject attended the school is required for the last 3 years. PO Boxes are unacceptable.
		APO/FPO is allowed, however the physical address must be included.
13. EMPLOYMENT HISTORY	X	All employment/unemployment within the last 7 years (10 years for SSBI) with no gap is required. Employment before the subject's 18th birthday is not required, unless it is to provide a minimum of 2 years residence history.
		Employment dates (month/year), code, complete name and address of employer, and complete address of job location, if different from employer, are required.
		Complete names of supervisors, addresses, and contact information are

			required.
			A verifier (other than the subject) is
			required for any period of self-
			employment or unemployment.
		Х	Commuting distance discrepancies
			between employments and residences
			require an explanation (in the additional
			comments).
	Х		PO Boxes are unacceptable.
			APO/FPO is allowed, however the
			physical address must be included.
- Former federal service	Х		If applicable, to and from dates, agency,
			city, state and zip code are required.
- Employment record	X		Yes/No response is required. If yes,
			complete details are required.
14. SELECTIVE SERVICE		Х	Yes/No response is required. If yes,
RECORD			males born after December 31, 1959,
			must list their Selective Service Number.
	Х		If no, subject must explain the reason
			for not registering.
15. MILITARY HISTORY	X		Yes/No response is required. If yes,
			complete details are required.
16. PERSONAL REFERENCES	Х		Three (3) personal references are
			required; at least 2 of the references
			provided must live in the US. Complete
			names with complete addresses and
			phone numbers are required.

			PO Boxes are unacceptable.
			APO/FPO is allowed, however the
			physical address must be included.
17. MARITAL STATUS	X		Marital status block must be checked.
- Current spouse	X		If married or separated, current spouse name is required. Other names used by spouse are required. All identifying information for the spouse is required, including information if spouse is foreign born.
- Former spouse		X	If applicable, subject must provide complete information. An explanation is required if the subject cannot provide the information (in the additional comments).
- Cohabitant	Х		If applicable, subject must provide complete information. If cohabitant was born outside the US, citizenship information is required.
18. RELATIVES	X		Complete names and information of mother and father is required. As applicable, complete address, POB, (city and state or country) and relatives' citizenship information are required. If any family member is foreign born, complete information is required.

		An explanation is required if the subject cannot provide the information (in the additional comments).
19. FOREIGN CONTACTS	Х	If applicable, subject must provide complete information.
20. FOREIGN ACTIVITIES	Х	If applicable, subject must provide complete information.
21. MENTAL AND EMOTIONAL HEALTH	X	If yes, complete name, address, phone number of the doctor and facility to include dates seen is required. A signed Medical Release must be attached to the e-QIP request.
22. POLICE RECORD	Х	If applicable, subject must provide complete information.
23. ILLEGAL USE OF DRUGS/DRUG ACTIVITY	Х	If applicable, subject must provide complete information.
24. USE OF ALCOHOL	Х	If applicable, subject must provide complete information.
25. INVESTIGATIONS AND CLEARANCE RECORD	Х	If applicable, subject must provide complete information.
26. FINANCIAL RECORD	X	If applicable, subject must provide the date debt was incurred, complete name of the creditor, account number, amounts owed, whether or not the debt is satisfied and/or an explanation of when the debt will be paid.

27. USE OF INFORMATION TECHNOLOGY SYSTEMS	Х	If applicable, subject must provide complete information.
28. INVOLVEMENT IN NON- CRIMINAL COURT ACTIONS	X	If applicable, subject must provide complete information.
29. ASSOCIATION RECORD	Х	If applicable, subject must provide complete information.
CERTIFICATION , GENERAL RELEASE FOR INFORMATION, CREDIT RELEASE, AND MEDICAL RELEASE PAGES	X	Amendments must be initialed and dated by subject. ALL forms and the signatures on the forms must be clear and legible. Certification date must be within 120-days of receipt at OPM. ALL forms attached must have the same e-QIP request number as the e-QIP request under review.